

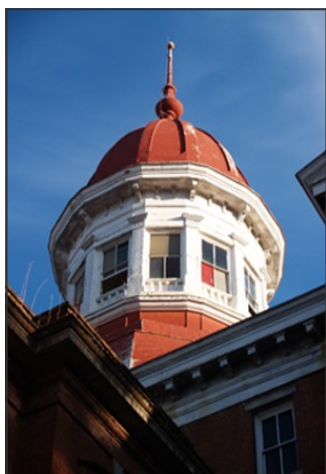


SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH
MARK W. BINKLEY, JD, INTERIM STATE DIRECTOR

BERKELEY COMMUNITY
MENTAL HEALTH CENTER
EXECUTIVE DIRECTOR J. MATTHEW DORMAN

September 2019

**DMH
MISSION:
TO SUPPORT
THE RECOVERY
OF PEOPLE WITH
MENTAL
ILLNESSES.**



Babcock Building Cupola

DMH HOSPITALS AND NURSING HOMES

Columbia, SC

G. Werber Bryan Hospital

Morris Village Alcohol & Drug
Addiction Treatment Center

C.M. Tucker, Jr. Nursing Care
Center - Stone Pavilion
(Veterans Nursing Home)

C.M. Tucker, Jr., Nursing Care
Center - Roddey Pavilion

Anderson, SC

Patrick B. Harris Hospital

Richard M. Campbell
Veterans Nursing Home

Walterboro, SC

Veterans Victory House
(Veterans Nursing Home)

DMH HISTORY AND DEMOGRAPHICS

South Carolina has a long history of caring for those suffering from mental illness. In 1694, the Lords Proprietors of South Carolina established that the destitute mentally ill should be cared for by local governments. The concept of "Outdoor Relief," based upon Elizabethan Poor Laws, affirmed that the poor, sick and/or disabled should be taken in or boarded at public expense. In 1762, the Fellowship Society of Charleston established an infirmary for the mentally ill. It was not until the 1800's that the mental health movement received legislative attention at the state level.

Championing the mentally ill, South Carolina Legislators Colonel Samuel Farrow and Major William Crafts worked zealously to sensitize their fellow lawmakers to the needs of the mentally ill, and on December 20, 1821, the South Carolina State Legislature passed a statute-at-large approving \$30,000 to build the South Carolina Lunatic Asylum and a school for the 'deaf and dumb'.

The Mills Building, designed by renowned architect Robert Mills, was completed and operational in 1828 as the South Carolina Lunatic Asylum. The facilities grew through the decades to meet demand, until inpatient occupancy peaked in the 1960's at well over 6,000 patients on any given day. Since the 1820's, South Carolina state-run hospitals and nursing homes have treated

approximately one million patients and provided over 150 million bed days.

In the 1920's, treatment of the mentally ill began to include outpatient care as well as institutional care. The first outpatient center in South Carolina was established in Columbia in 1923.

The 1950's saw the use of phenothiazines, "miracle drugs" that controlled many severe symptoms of mental illness, making it possible to "unlock" wards. These drugs enabled many patients to function in society and work towards recovery, reducing the need for prolonged hospitalization. Government support and spending increased in the 1960's. The South Carolina Community Mental Health Services Act (1961) and the Federal Community Health Centers Act (1963) provided more funds for local mental health care.

The South Carolina Department of Mental Health (DMH) was founded in 1964. In 1967, the first mental healthcare complex in the South, the Columbia Area Mental Health Center, was built. Since then, the Centers and clinics have served more than three million patients, and provided more than 42 million clinical contacts.

Today, DMH operates a network of 16 community mental health centers, multiple clinics, three hospitals, three veterans' nursing homes, one community nursing home, a Forensic Program, and a Sexually Violent Predator Treat-

ment Program (SVPTP). DMH is one of the largest hospital and community-based systems of care in SC.

In response to community needs, DMH has developed multiple innovative programs, two of which are its School Mental Health Services (SMHS) and Telepsychiatry. As of July 2019, DMH's SMHS has mental health professionals embedded in more than 700 public schools and serves thousands of children per year. DMH Telepsychiatry utilizes state-of-the-art equipment that allows doctors to see, speak with, and evaluate patients from remote locations. DMH provides telepsychiatry in its clinics, hospitals, and 23 community hospital emergency departments. DMH Telepsychiatry programs have provided more than 118,000 comprehensive evaluations and services.

**DMH
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NURSING HOME.**



**BERKELEY COMMUNITY
MENTAL HEALTH CENTER**
403 STONEY LANDING ROAD
MONKS CORNER, SC 29461
(803) 761-8282

Serving Berkeley County

BERKELEY COMMUNITY MENTAL HEALTH CENTER

Established in 1981, Berkeley Community Mental Health Center (BCMHC) is the youngest of the 16 mental health centers operated by DMH. Located on Stoney Landing Road in Moncks Corner, the 26,000 square foot facility was built in 1992 in response to increased need for mental health services due to commercial and residential growth.

The mission of BCMHC is for staff to work in partnership with patients, families, and the community, to assist adults and children with severe, persistent mental illnesses to improve the quality of patients' lives. The Center staff values input and feedback from patients, families, and community stakeholders.

Services offered include individual, group and family therapies; medication and nursing services; 24/7 crisis intervention services; vocational readiness; peer support services; integrated primary care, and community placement (Homeshare/Housing) services.

BCMHC has partnerships with area service organizations (Berkeley County Schools, Department of Juvenile Justice, Department of Social Services and area Law Enforcement) allowing BCMHC clinicians to be embedded in those facilities to allow for easy access to mental health treatment and services.

At BCMHC, staff believe that patients are best served within their home communities; with treatment, people with mental illnesses can lead full lives; and investing in treatment for children, adolescents, and their families is vitally important. These beliefs have led to three major accomplishments: One, a historically low number of patients from Berkeley County have needed to be admitted to State psychiatric hospitals. Two, the Center has moved to rehabilitation-focused treatment versus maintenance-focused treatment. And three, the Center has established vital, evidence-based outpatient programs for children and their families.

BCMHC gives priority to adults and children with serious mental illnesses and serious emotional disturbances and fulfills its legislative mandates. BCMHC works cooperatively with other agencies, both public and private, to assure continuity of services.

BCMHC operations extend beyond the day-to-day treatment of patients; staff and service providers are often in the community educating others about treatment resources, participating in awareness campaigns, discussing wellness activities with area agency personnel and providing trauma treatment for first responders.

All DMH facilities are licensed or accredited; the BCMHC Outpatient Program for Adults and Children/Adolescents has been accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) since 1997.

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Vicki Ellis,
Board Chair

“MENTAL
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ELLIS

VICKI ELLIS, BOARD CHAIR AND SAMUEL DARBY, BOARD MEMBER

Board Chair Vicki Ellis, an active member of the Board for many years, is dedicated to ensuring people who need mental health care receive proper care. Ellis, an emergency room nurse at Trident Medical Center, wants to know that her patients are properly cared for after they leave the hospital.

“Mental illness is a medical issue, which can be improved with treatment. Like patients with diabetes and heart disease, without

proper care and/or medication, patients with mental illness will have problems,” said Ellis.

Sam Darby, an active member of the Board, is passionate about ensuring BCMHC focuses on families and their involvement in one’s treatment. Darby, a retired communications technician with AT&T, brings vast life experiences to the Board.

Both members agree that strategic and thoughtful expansion efforts to meet the

unprecedented demands on BCMHC are of paramount importance. In pursuit of this goal, BCMHC Board Members continue to give input and feedback to community partners, policy makers, and stakeholders to ensure proper support is given to the Center.



J. Matthew Dorman,
BCMHC Executive Director

J. MATTHEW DORMAN, EXECUTIVE DIRECTOR

J. Matthew Dorman began working with the South Carolina Department of Mental Health in 1994. During his 25 year career, Dorman has worked in a variety of mental health care settings and provided care to a broad spectrum of patients. Included in those are his work in a traditional community mental health setting, contracting as a mental health professional in a private practice office, and service as an Employee Assistance Professional via the U.S. Department of Defense during Operation Enduring Freedom.

Dorman has extensive experience

in suicide assessment, crisis intervention, psychological first-aid, and providing evidence-based trauma treatment for those suffering from mental illnesses and combat related stress.

Most recently, Dorman has supervised numerous programs, administrative staff, front line clinical staff, mid-level managers, and upper level leaders. “Joining the Berkeley Community Mental Health Center in 2014 afforded me an opportunity to be part of dynamic organization that is poised to reshape community mental health services in Berkeley County,” said Dorman. He

was appointed executive director of BCMHC in February 2019. “I am humbled, honored and appreciate the gravity of what is expected of me in the role of executive director. I am confident the men and women of BCMHC will meet the unprecedented demands for services and do so with passion, dedication and the highest quality; it is what our patients, families, and community deserve,” he said.

GERALDINE ‘GERI’ PAZI, LPC, DIRECTOR OF SCHOOL MENTAL HEALTH SERVICES

BCMHC, under the direction of Geri Pazi, LPC, has created a School Mental Health service delivery model that embedded clinicians in 33 of the Berkeley County School Districts 47 schools in 2019.

Pazi has the unique perspective of having once worked as a BCMHC School Mental Health therapist. She brings that experience and her knowledge of the community and the behavior health

industry to provide an efficient and effective service line. Pazi noted that having clinicians embedded in Berkeley County Schools accomplishes goals that go beyond treatment. In her view, bringing mental health care out of the shadows and into the community is the best way to fighting stigma.

“Our staff, everyday and in every way, empower Berkeley’s school age children to rise to be their best,” said

Pazi. It is a joint goal of the South Carolina Department of Education and Department of Mental Health for every child attending a public school to have quick and seamless access to mental health care in their respective school. With Pazi’s leadership, BCMHC School Mental Health Services intends to accomplish that goal.



Geri Pazi, Director of School
Mental Health Services

TABITHA PRESSLEY 2018 BCMHC EMPLOYEE OF THE YEAR

Tabitha Pressley is the 2018 Berkeley Community Mental Health Center Employee of the Year. This is the second time in her 25 year career Pressley has received this high honor. In fact, her co-workers are of the opinion that she could be selected for this honor each year.

As one might expect, Pressley brings to her profession and BCMHC a steadfast and unwavering passion that is seen, heard, and experienced by all who she encounters.

As supervisor of BCMHC clinical support staff, patients, guests, and community partners interact with Pressley’s team prior to anyone else at the facility.

Pressley greets everyone with a smile and a “can-do” positive attitude. If she cannot help, she will find the person who can. She treats everyone with dignity and respect in every encounter. These words are not just platitudes; she embodies this philosophy. Pressley is as genuine as they come. She

cares deeply for her family, friends, work, and community, and is always willing to lend a hand. She does whatever it takes to get the job done.



Tabitha Pressley,
2018 BCMHC
Employee of the Year

RICHARD ALBARRAN, DIRECTOR OF EMERGENCY SERVICES



Richard Albarran,
Director of Emergency Services

"I BELIEVE WE
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ALBARRAN

BCMHC has long considered its access to care a vital component of its service delivery. In 1989, the Center established a central admission unit called the Access Center. Richard Albarran, who joined the BCMHC in 1991, has seen, firsthand, the evolution of access to mental health care for Berkeley County residents. Originally designed to provide an easy to use enrollment process for patients, the Access Center employed Master's-level Clinicians who performed psychosocial assessment in an office-based setting. The process was efficient, effective, and met the needs of BCMHC patients. The Access Center discovered that adding an Emergent Stabilization Unit treatment process for patients would provide an additional resource for those in acute distress. The Stabilization Unit provided office based services to patients who required more immediate services to care. The Access Team and Stabilization Unit comprised mental health counselors, nurses, psychiatrists, and support staff within the larger treatment practice of BCMHC.

As demands on BCMHC services grew, the Access Center expanded its service delivery to include a Mobile Crisis Unit, and in 2015 the Access Team became the Access/Mobile Crisis (A/MC) unit. The nine member team is primarily made up of Master's

-level counselors with support from BCMHC support staff, nurses, and psychiatrists. A/MC provides phone consultation, enrollment, office-based crisis intervention services, and community-based crisis intervention. Citizens may contact the A/MC 24/7 to discuss treatment options or receive a face to face intervention from crisis counselors. In addition to the goal of providing immediate access and treatment enrollment processes, the A/MC unit has partnered with the local probate court and local law enforcement to provide the safest and least restrictive services to Berkeley County residents experiencing a mental health crisis.

Outcomes can often be a quick connection to the Center to initiate an extensive array of services. However, in some cases, the safest outcome may be to initiate an admission to a local psychiatric hospital. The Mobile Crisis team has established relationships with local medical and psychiatric facilities to ensure a seamless process in accessing immediate care in these cases.

In conjunction with the A/MC, Albarran is also responsible for managing the Intensive Community Treatment (ICT) team. This team is composed of two clinicians, nursing staff, and a psychiatrist who manage BCMHC "high intensity" patients.

These patients require intensive follow up (weekly) due to the severity of their symptoms. The ICT team's focus is to provide treatment services in an effort to reduce symptoms of illness, reduce inpatient psychiatric admissions, and to assist them with improvements in patients' quality of life.

Richard Albarran obtained his Bachelor of Arts degree in Psychology and minor in Sociology from Francis Marion University and his master's degree in Education in Clinical Counseling from the Citadel. "I believe that working in a community mental health center carries the responsibility of implementing programs and treatment interventions that enable our patients to remain safely in the community and close to their families. The Access /Mobile Crisis Unit's main function is to strive towards that goal when patients first request services, as well as when they are in crisis. With prompt appointments, close follow-up by the Access/Mobile staff, and programs like Intensive Community Treatment, we are able to successfully achieve this goal," said Albarran.

KELLY SEILING, SUPERVISOR, SC VOCATIONAL REHABILITATION-BERKELEY/DORCHESTER AREA OFFICE

BCMHC collaborates with many agencies daily, such as Trident Hospital, Roper Hospital, the SC Department of Alcohol and Other Drug Abuse Services, the SC Department of Social Services, the SC Department of Juvenile Justice, and the SC Vocational Rehabilitation Department (SCVRD).

According to Vocational Rehabilitation Supervisor Kelly Sieling, SCVRD serves people who want to work but are discouraged from doing so by a physical or mental disability. SCVRD provides evaluations, job skills training, and job placement for competitive employment.

In keeping with its mission of promoting recovery and community integration, BCMHC formed a partnership with the local SCVRD office in 1986 and has sustained this partnership, which supports patients going to work. Currently, the vocational program model is Individual Placement and Support (IPS). The IPS supervisor at BCMHC works in tandem with a job coach/developer from SCVRD to rapidly place any patient who wants to work in their vocation of choice. More than 40 patients are currently employed through the IPS program. "IPS is one of my

favorite programs we offer at Voc. Rehab. It's one of our most successful programs, due to the positive relationship we have with the Berkeley Community Mental Health Center and the individualized services we provide our patients," said Sieling. "We interface in a variety of ways."

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SEILING

"I am always impressed at how the IPS counselors stay so involved with their patients. It's great that, together, the Vocational Rehabilitation Department and the Berkeley Community Mental Health Center help so many people transform from being sheltered and withdrawn to being successfully employed citizens. The satisfaction of using employment as part of mental health treatment and seeing our folks experience success through employment makes

me love what I do," she said.

Sieling and Director Dorman are both part of the Agency Director's Forum. The group, which consists of most of the Agency heads in the county, meets once a month. According to Sieling, it's a time to meet, problem solve, share ideas, and blend resources. "The need for services is especially great in the outlying, rural areas. We advocate together to provide what we can for all the citizens of Berkeley county," she said.

Originally from Prosperity, SC, Sieling is an avid Gamecock fan with a degree in Criminal Justice from the University of South Carolina. She has worked with the SCVRD for 20 years and has been the Berkeley/Dorchester Area supervisor for the past 13 years.



Kelly Sieling, Supervisor,
SC Vocational Rehabilitation



TO SUPPORT THE RECOVERY OF
PEOPLE WITH MENTAL ILLNESSES.

SC DEPARTMENT OF MENTAL HEALTH

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WWW.SCDMH.ORG

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Monks Corner, SC 29461

(843) 761-8282

Hours of Operation:
8:00 a.m. - 6:00 p.m.
Monday - Friday

WWW.BCMHC.ORG

RECOVERY SPOTLIGHT – BY LISA

I was given a medication to quit smoking and I started to become sick with migraines and stomach issues. I was missing a lot of work. I wasn't able to work out or run anymore. I started having trouble sleeping, and couldn't get out of bed, let alone take a shower or even brush my teeth. I was confused as to what was going on.

I was praying that I could just 'snap out of it' like everyone told me to, but it wasn't working. I went to the doctor to get help and they put me on some medication. All that did was make me gain 100 pounds, and I was still crying all the time. I didn't recognize myself on the outside, let alone on the inside, anymore. I was ashamed of what I let happen to myself.

I was at the point where I gave up on everything, including God. I

tried to commit suicide from an overdose. Now all these things started happening, I was still alive but now I had all these physical issues due to my overdose. I was losing my house and everything was out of my control. But in spite of this, I started coming to Berkeley Community Mental Health Center, praying and hoping I could get some help.

The people began to listen to me and they really heard me. I found that if I wanted to get better, that I would have to be an essential part of my Own recovery. I had to participate! Through treatment, I started working on the tools that were given to me: medication, affirmation self-talk, communication skills, and books and worksheets to read and do which helped with my cognitive memory loss. I just took one day at

a time, and over a period of time I noticed I was improving.

I am proud to report that I have started walking and doing yoga, which has helped me in losing the weight I gained. I've also started doing meditation every day. I'm still continuing with all the coping strategies that I received from my Berkeley Community Mental Health therapy team. I am also able to read and comprehend the materials. I even went to a training class and passed the test to become a new Peer Support Specialist. I am excited for the first time about something and that's starting my new career. I look in the mirror and I'm proud of the person I'm becoming!